**Mount Vernon Parks & Recreation** 

# 3rd & 4th Grade Girls Basketball League

This is a recreation basketball league geared towards teaching basketball fundamentals with fun and competitive skills that emphasize teamwork. Girls of all abilities will practice together and form into teams for games.

# Registration Deadline: February 17th! Call today: 336-6215!



**AGES:** Girls, 3<sup>rd</sup> & 4<sup>th</sup> grades **FEE**: \$50, includes T-shirt!

**PRACTICES**: March 13, 15, 20, 22, 29\*, April 12 ~ 6:00pm to 7:15pm

**GAME\$:** March 27, April 10, 17, 19 ~ 5:45pm to 7:30pm

Location: Madison Elementary Gym

(\*March 29<sup>th</sup> practice will be at Cascade Commons Gym)

**COACH:** Brenyn Hart

Please wear tennis shoes, basketball shorts and bring a water bottle with a secure lid.

	REGIST	RATION	FORM			
Player's Name:		Gra	de:DOB	B: !	School:	
Parent/Guardian Name:						
Address:		City/State/Zip:				
Phone: Home:	Work:			Cel	l:	
E-mail Address:						
**List any pertinent medical info (	asthma, etc.)					
Emergency Contact Name:		Phone:				
********T-shirt Size: (You	uth Sizes, please circle):	S(6-8)	M(10-12)	L(14-16)	Adult Small******	
I(we) am/are the parents(s) or legal guardian of sponsored recreational activity of 3 <sup>rd</sup> & 4 <sup>th</sup> Graunderstand there are special dangers and risks consequences which may arise directly or indiof the City's allowing my child to participate in above-named participant child, assume all risk of City facilities. I(we) further agree, individuo officials, employees and agents and agree to we personal injury, death or other harmful consequentiation. I(we) grant my(our) full and voluntar participant has any physical ailment or condition or programs, I have consulted with my personal Mount Vernon and Mount Vernon Parks and Flaw.**I have signed the Concussion Information	inherent in this activity, increetly from the child's particular this sponsored activity and of injury, damage and harrially and on behalf of the abvaive any right of recovery the uncest occurring to the above occurring to the above on the might affect my hall physician or other medical Recreation prohibits discriments.	cluding but icipation in ad/or use of m to the chipove-named that I(we) nove-named child to mealth or the al authority nination on	not limited to, the this activity. Be City facilities I( ld which may are child, to release the participate in the health of the participate and received per and received per city.	ne risk of serio eing fully infor we), on behalt rise from the cle and hold harn g a claim or la ng out of the C he activity des articipant throu ermission to pa	ous physical injury, death or other I rmed as to these risks and in consider of of myself(ourselves) and on behathild's participation in the activities mless the City of Mount Vernon, it would for damages against them for Child's voluntary participation in the activities above. I hereby certify that the ugh participating in recreational activities. I understand that the Cite and on the constant is the cite of the constant in the cite of the c	harmful deration alf of the s or use ts or any his t if the ctivities ty of
Parent(s) / Guardian Signature(s)	Parent(s) / Gu	uardian Prir	nted Name(s)		Date	
I hav	e signed the Concussion	n Informat	tion Sheet on t	he back of t	this form	$\sim$

This event/activity is NOT being sponsored by the Mount Vernon School District, and the District assumes no responsibility for the conduct or safety of the event/activity. In consideration for the privilege to distribute these materials, the school districts named shall be held harmless from any cause of action, claim, or petition filed in any court or administrative tribunal arising of the distribution of these materials, including all costs, attorney's fees and judgments or awards.



## **Concussion Information Sheet**



A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a "ding" or a bump on the head can be serious. You can't see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of	f the following:		
-Headaches -"Pressure in head -Nausea or vomiting -Neck pain -Balance problems or dizziness -Blurred, double or fuzzy vision -Sensitivity to light or noise	-Feeling sluggish or slowed down -Feeling foggy or groggy -Drowsiness -Change in sleep patterns -Amnesia -"Don't feel right" -Fatigue or low energy	-Sadness -Nervousness or anxiety -Irritability -More emotional -Confusion -Concentration or memory problems -Repeating the same questions/comments	
Signs observed by teammates, parents	s and coaches may include:		
-Appears dazed -Vacant facial expression	-Slurred speech -Shows behavior	-Slurred speech -Shows behavior or personality changes	

### What can happen if my child keeps on playing with a concussion or returns too soon?

-Can't recall events prior to hit

-Any change in typical behavior or personality

-Can't recall events after hit

-Seizures or convulsions

-Loses consciousness

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administration, coaches, parents and students is the key for student athlete's safety.

### If you think your child has suffered a concussion:

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

"a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time."

### and

Confused about assignment

-Answers questions slowly

-Is unsure of game, score or opponent

-Moves clumsily or displays incoordination

-Forgets plays

"...may not return to play until the athlete is evaluated by a licensed heath care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider."

You should also inform your child's coach if you think that your child may have a concussion. Remember, its better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

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Student Athlete Printed Name			
Parent or Legal Guardian Printed Name	Parent or Legal Guardian Signature	Date	